

FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No 1215-0188
Expires 11 30 2006

This report is mandatory under P L 86 257 as amended Failure to comply may result in criminal prosecution fines or civil penalties as provided by 29 U S C 439 or 440

For Official Use Only

E



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

1 File Number U 3528	2 Fiscal Year Covered From 1 / 1 / 05 Through 12 / 31 / 05
3 Name and address of person filing Name Ronald J Sikorski P O Box Bldg Room No if any Street 1647 W Lugonia City Redlands State California ZIP Code + 4 92374	4 Name file number and address of labor organization Name International Union of Operating Eng #12 Labor Organization File Number 007156 P O Box Building and Room Number if any Street 150 E Corson St City Pasadena State California ZIP Code + 4 91103
5 Position in labor organization District Representative	

Enter appropriate data below if during the past fiscal year you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions)

A Held an interest in engaged in transactions (including loans) with or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent	
6 Name and address of Employer (including trade name if any) Name Trade Name if any P O Box Bldg Room No if any Street City State ZIP Code + 4	7 a Nature of Interest Transaction or Income 7 b Amount

Signature

15 Signature and verification The undersigned declares under penalty of Perjury and other applicable penalties of the law that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is to the best of the undersigned's knowledge and belief true correct and complete (See the section on penalties in the instructions)

Signed

On

3/27/06
Date

909/307-8700

Telephone Number

Name of Person Filing Ronald J Sikorski	File Number U
--	---------------

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any) Name Trade Name if any P O Box Bldg Room No if any Street City State ZIP Code + 4	9 Business deals with <div style="margin-left: 40px;"> a Labor Organization <input checked="" type="checkbox"/> b Trust c Employer </div>
10 If 9 b or 9 c is checked give trust or employer's name Name Operating Engineers Trust Funds Trade Name if any P O Box Bldg Room No if any P O Box 7063 Street 100 E Corson City Pasadena State California ZIP Code + 4 91109	11 a Nature of such dealing <div style="margin-left: 40px;"> Travel and expense reimbursement lunch at Trust meetings </div>
	11 b Approximate dollar value of such dealing 2092 66
	12 a Nature of interest held or income received
	12 b Amount

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

13 a Name and address of Employer or Labor Relations Consultant (including trade name if any) Name Trade Name if any P O Box Bldg Room No if any Street City State ZIP Code + 4	14 a Nature of payment
13 b Is the Business an Employer or Consultant ?	14 b Amount of payment

EXPENSE REPORT
JAN - DEC 2005

<u>NAME</u>	<u>CHECK DATE</u>	<u>CHECK NO</u>	<u>AMOUNT</u>
RON SIKORSKI	5/5/05	34004	133 86
	6/2/05	34150	1,863 51
		TOTAL	<u>\$ 1,997 37</u>

x

DESCRIPTION

34004

DATE	INVOICE NUMBER	ACCOUNT	WELLS FARGO	PENSION	VACATION & HOLIDAY	ADJUSTICE	GEN LEDGER	BALANCE
1	11	412	
TRUSTEES MTG & EXPENSES								133.00

PLEASE DETACH
THIS REMITTANCE ADVICE
BEFORE DEPOSITING CHECK

OPERATING ENGINEERS FUNDS INC

THE ATTACHED CHECK
IS IN PAYMENT OF THE
ITEMS LISTED ABOVE

OPERATING ENGINEERS FUNDS INC
GENERAL ACCOUNT
P.O. BOX 706
PASADENA, CALIFORNIA 91109

WELLS FARGO BANK
PASADENA MAIN BR. SOUTH HAVEN AVENUE PASADENA, CA 91101

34004

DATE: 05/20/72

AMOUNT: \$133.00

FROM: TRUSTEES

TO: THE ORDER OF: OPERATING ENGINEERS FUNDS INC
GENERAL ACCOUNT

2220

NON NEGOTIABLE

TRUSTEE EXPENSE VOUCHER

Ron Sikorski

THIS VOUCHER IS FOR

- ☐ EXPENSES IN CONNECTION WITH ATTENDANCE AT TRUST MEETING AT Las Vegas (Location)
HELD ON 3-18-05 (Date(s) of Meeting)
- ☐ EXPENSES IN CONNECTION WITH ATTENDANCE AT EDUCATIONAL MEETING AT _____ (Location)
HELD ON _____ (Session Date(s))
SPONSORED BY _____ (Meeting Sponsor)
- ☐ OTHER. (Describe Reason for Incurring Expenses) _____

MY DATE OF DEPARTURE 3-17-05 MY DATE OF RETURN 3-19-05

EXPENSES

TRANSPORTATION EXPENSES.

- ☐ Airfare, Train Bus _____ \$
- ☐ Rental Car Expense _____ \$

DAILY EXPENSES

☒ DAILY EXPENSES (FROM REVERSE SIDE OF VOUCHER) _____ \$ 133 86

MEETING REGISTRATION FEE.

☐ MEETING REGISTRATION FEE EXPENSE (ATTACH RECEIPT) _____ \$

SETTLEMENT

TOTAL EXPENSES WHICH I INCURRED \$ 133 86 ✓

LESS THE AMOUNT I RECEIVED AS AN ADVANCE (IF ANY) \$ _____

EQUALS \$ _____

☐ REFUND WHICH I OWE TO TRUST FUND MY CHECK IS ATTACHED \$ _____

OR

☒ AMOUNT OWING ME BY TRUST FUND I REQUEST REIMBURSEMENT \$ 133 86

I HEREBY CERTIFY THAT THE EXPENSES DETAILED ON THIS VOUCHER ARE THE PROPER AND ACTUAL EXPENSES WHICH I INCURRED IN CONNECTION WITH THE TRUST FUND ACTIVITY NOTED ABOVE.

Ronald Sikorski
(Signature of Trustee)

DATED THIS 4 DAY OF 4, 20 05

1647 W Lugonia Ave, Redlands, CA
(Address and City) 92374

NOTE TO TRUSTEE. This voucher is for expenses personally incurred by you as a Trustee. If transportation charges hotel deposits, registration fees or any other item has been paid directly by the Trust Fund, do not list on this voucher. If you travel with a family member or other person not connected with the Trust Fund, the expenses of such person are not reimbursable. If such expenses are included on any of the attached bills or receipts, you should note the necessary adjustments on the bill or receipt. (For example: If a restaurant bill contains a charge for a meal for one or more family members, subtract that amount and indicate on the bill that only the balance is being charged to the trust fund.) If any expense item requires an explanation, mark the item with an asterisk and write the explanation on the reverse side of this voucher. Reimbursement of expenses claimed on this voucher is subject to any expense policy or limitation which may have been adopted by the Board of Trustees.

PAID MAY 06 2005

DAILY EXPENSES (ATTACH RECEIPTS FOR ALL MEAL EXPENSES AND AN SINGLE ITEM OF \$25 OR MORE)

DATE. <u>3-18-05</u>	DATE. _____	DATE. _____
HOTEL ROOM PLUS TAX \$ _____	HOTEL ROOM PLUS TAX \$ _____	HOTEL ROOM PLUS TAX \$ _____
BREAKFAST & TIP \$ <u>31.77</u>	BREAKFAST & TIP \$ _____	BREAKFAST & TIP \$ _____
LUNCH & TIP \$ <u>102.09</u>	LUNCH & TIP \$ _____	LUNCH & TIP \$ _____
DINNER & TIP \$ _____	DINNER & TIP \$ _____	DINNER & TIP \$ _____
BEVERAGES & TIP \$ _____	BEVERAGES & TIP \$ _____	BEVERAGES & TIP \$ _____
PORTERS-BELLMEN \$ _____	PORTERS-BELLMEN \$ _____	PORTERS-BELLMEN \$ _____
LIMOS-TAXIS-BUSES \$ _____	LIMOS-TAXIS-BUSES \$ _____	LIMOS-TAXIS-BUSES \$ _____
_____ \$ _____	_____ \$ _____	_____ \$ _____
(Other)	(Other)	(Other)
TOTAL THIS DATE \$ <u>133.86</u>	TOTAL THIS DATE \$ _____	TOTAL THIS DATE \$ _____

DATE. _____	DATE. _____
HOTEL ROOM PLUS TAX \$ _____	HOTEL ROOM PLUS TAX \$ _____
BREAKFAST & TIP \$ _____	BREAKFAST & TIP \$ _____
LUNCH & TIP \$ _____	LUNCH & TIP \$ _____
DINNER & TIP \$ _____	DINNER & TIP \$ _____
BEVERAGES & TIP \$ _____	BEVERAGES & TIP \$ _____
PORTERS-BELLMEN \$ _____	PORTERS-BELLMEN \$ _____
LIMOS-TAXIS-BUSES \$ _____	LIMOS-TAXIS-BUSES \$ _____
_____ \$ _____	_____ \$ _____
(Other)	(Other)
TOTAL THIS DATE \$ _____	TOTAL THIS DATE \$ _____

IF MORE THAN FIVE DAYS
ATTACH AN ADDITIONAL
VOUCHER SHEET

TOTAL OF ALL DAILY EXPENSES \$ 133.86

(Transfer amount to front side of voucher)

EXPLANATIONS (IF NEEDED).

*Reimbursable expenses shall not include expenses of a personal nature or those expenses which are not related to fund business. For example personal recreational expenses such as golf tennis rental of fishing boat and in-room movies are not reimbursable expenses.

SPACE FOR USE OF ADMINISTRATIVE AGENT OR FOR APPROVAL OF TRUST OFFICERS (IF REQUIRED)

DISCLAIMER

The International Foundation is making this form available as part of its role of providing educational materials regarding employee benefit matters. This form is not intended to provide ground rules for expense reimbursement or the reporting of expense reimbursement for your Fund. What is appropriate or proper in a situation depends on a number of factors including the terms of the Fund's Trust Agreement policies and practices and the application of laws and regulations to the facts and circumstances of a particular situation. You should consult with your Fund's advisors including legal counsel regarding what is an appropriate and proper expense reimbursement and reporting of such items. You may need to customize the form to reflect your Fund's policies and circumstances.



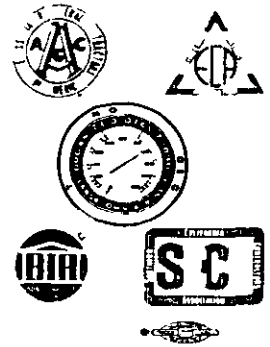
OPERATING ENGINEERS TRUST FUNDS

I.U.O.E. LOCAL 12 HEALTH & WELFARE / PENSION / VACATION / TRAINING

100 EAST CORSON STREET PASADENA CALIFORNIA 91103 (626) 356 1000

P O BOX 7063 PASADENA CALIFORNIA 91109

WEBSITE www.oefunds.org



March 23, 2006

Mr Ron Sikorski
I U O E , LOCAL #12
1647 W Lugonia
Redlands, CA 92374

Re **CORRECTED INFORMATION**

Dear Mr Sikorski

During Calendar Year 2005, the Operating Engineers Funds, Inc , reimbursed you \$1997 37 That amount represents reimbursement for your attendance at the International Foundation Meeting held in May, 2005, in Washington D C Copies of the reimbursement details are enclosed

Additionally, the total value of food cost for your attendance at Trust meetings during Calendar Year 2005, calculates to \$95 29

Yours very truly,

Neil Bharadwaj
Controller

NB leh

CI BFDKMIYASB 3/17/05 3 16 PM
CO BFDKBEEVEM 3/19/05 8 46 AM

Arrival Date 3/17/05
Departure Date 3/19/05

BALLY'S LAS VEGAS

3645 Las Vegas Blvd South Las Vegas NV 89109
FOR RESERVATIONS CALL 1-800-634-3434
702 967-4111

Name **RON SIKORSKI**
IOUE LOCAL 12
Address **150 E CORSON ST**
PASADENA CA 91103

Group Code **SBOET5**

Casino ID 101 7994129
Room # BB 2579

Resv ID 383781412988
Folio ID 384284349385

Page 1

Date	Reference	Description	Charges	Credits	Balance
03/18/05	0944982	ROOM SERVICE BALLY'S	31 77		31 77
03/18/05	0096073	MON AMI GABI PARIS	102 09		133 86
03/18/05	4350659	MOVIES/GAMES/BALLYS	10 99		144 85
		52579 14 45 VOD 4764			
03/19/05		FRONT DESK VISA		144 85	
		XXXXXXXXXXXXXXXX7903			
					00

\$133.85

Thank You for Staying at Bally's Las Vegas

Printed: 3/20/05

34150

DESCRIPTION

DATE	VOICE NUMBER	ACCT. NO.	ALTH & WELFARE	PENSION	VACATION	AGENCY	GEN LEDGER	BALANCE
05/26/05	5/16-18/05	4710 A	.00	.00	.00	1363.51	.00	1363
INT'L FOUND MTG FEES & EXP								1863.

PLEASE DETACH
THIS REMITTANCE ADVICE
BEFORE DEPOSITING CHECK

OPERATING ENGINEERS FUNDS INC

THE ATTACHED CHECK
IS IN PAYMENT OF THE
ITEMS LISTED ABOVE

OPERATING ENGINEERS FUNDS INC
GENERAL ACCOUNT
P.O. BOX 7033
PASADENA, CALIFORNIA 91109

WELLS FARGO BANK
PASADENA MAIN & SOUTH LAKE AVENUE PASADENA, CALIF. 91109

34150

PAY
TO THE
ORDER
OF

05/26/2005

OPERATING ENGINEERS FUNDS INC
GENERAL ACCOUNT

000000

NON NEGOTIABLE

TRUSTEE EXPENSE VOUCHER
Ron Sikorski

THIS VOUCHER IS FOR

☐ EXPENSES IN CONNECTION WITH ATTENDANCE AT TRUST MEETING AT _____ (Location)
HELD ON _____ (Date(s) of Meeting)

☒ EXPENSES IN CONNECTION WITH ATTENDANCE AT EDUCATIONAL MEETING AT Washington D C (Location)
HELD ON 5-16-05 to 5-18-05 (Session Date(s))

SPONSORED BY International Foundation (Meeting Sponsor)

☐ OTHER: (Describe Reason for Incurring Expenses) _____

MY DATE OF DEPARTURE 5-15-05 MY DATE OF RETURN 5-19-05

EXPENSES

TRANSPORTATION EXPENSES

☒ Airfare Train Bus _____ \$ 1,203 30

☐ Rental Car Expense _____ \$ _____

DAILY EXPENSES

☐ DAILY EXPENSES (FROM REVERSE SIDE OF VOUCHER) _____ \$ 660 21

MEETING REGISTRATION FEE

☐ MEETING REGISTRATION FEE EXPENSE (ATTACH RECEIPT) _____ \$ _____

SETTLEMENT

TOTAL EXPENSES WHICH I INCURRED \$ 1 863 51

LESS THE AMOUNT I RECEIVED AS AN ADVANCE (IF ANY) \$ -0-

EQUALS \$ 1,863 51

☐ REFUND WHICH I OWE TO TRUST FUND MY CHECK IS ATTACHED \$ _____

OR

☐ AMOUNT OWING ME BY TRUST FUND I REQUEST REIMBURSEMENT \$ 1 863 51

I HEREBY CERTIFY THAT THE EXPENSES DETAILED ON THIS VOUCHER ARE THE PROPER AND ACTUAL EXPENSES WHICH I INCURRED IN CONNECTION WITH THE TRUST FUND ACTIVITY NOTED ABOVE.

DATED THIS 20th DAY OF May, 2005

Ron Sikorski
(Signature of Trustee)

1647 W Lugonia Ave, Redlands CA 92374
(Address and City)

NOTE TO TRUSTEE: This voucher is for expenses personally incurred by you as a Trustee. If transportation charges hotel deposits registration fees or any other item has been paid directly by the Trust Fund, do not list on this voucher. If you travel with a family member or other person not connected with the Trust Fund the expenses of such person are not reimbursable. If such expenses are included on any of the attached bills or receipts you should note the necessary adjustments on the bill or receipt. (For example: If a restaurant bill contains a charge for a meal for one or more family members, subtract that amount and indicate on the bill that only the balance is being charged to the trust fund.) If any expense item requires an explanation, mark the item with an asterisk and write the explanation on the reverse side of this voucher. Reimbursement of expenses claimed on this voucher is subject to any expense policy or limitation which may have been adopted by the Board of Trustees.

PAID June 10, 2005

DAILY EXPENSES (ATTACH RECEIPT FOR ALL MEAL EXPENSES AND ANY SINGLE ITEM OF \$25 OR MORE)

DATE <u>5-15-05</u>	DATE <u>5-16-05</u>	DATE <u>5-17-05</u>
HOTEL ROOM PLUS TAX \$ _____	HOTEL ROOM PLUS TAX \$ _____	HOTEL ROOM PLUS TAX \$ _____
BREAKFAST & TIP \$ _____	BREAKFAST & TIP \$ _____	BREAKFAST & TIP \$ _____
LUNCH & TIP \$ <u>75 80</u>	LUNCH & TIP \$ _____	LUNCH & TIP \$ _____
DINNER & TIP \$ _____	DINNER & TIP \$ _____	DINNER & TIP \$ _____
BEVERAGES & TIP \$ _____	BEVERAGES & TIP \$ _____	BEVERAGES & TIP \$ _____
PORTERS-BELLMEN \$ <u>15 00</u>	PORTERS-BELLMEN \$ <u>10 00</u>	PORTERS-BELLMEN \$ <u>10 00</u>
LIMOS-TAXIS-BUSES \$ <u>20 00</u>	LIMOS-TAXIS-BUSES \$ <u>20 00</u>	LIMOS-TAXIS-BUSES \$ <u>15 00</u>
_____ \$ _____	_____ \$ _____	_____ \$ _____
(Other)	(Other)	(Other)
TOTAL THIS DATE \$ <u>110 80</u>	TOTAL THIS DATE \$ <u>30 00</u>	TOTAL THIS DATE \$ <u>25 00</u>

DATE <u>5-18-05</u>	DATE <u>5-19-05</u>
HOTEL ROOM PLUS TAX \$ _____	HOTEL ROOM PLUS TAX \$ _____
BREAKFAST & TIP \$ <u>20 45</u>	BREAKFAST & TIP \$ _____
LUNCH & TIP \$ <u>103 40</u>	LUNCH & TIP \$ _____
DINNER & TIP \$ <u>330 56</u>	DINNER & TIP \$ _____
BEVERAGES & TIP \$ _____	BEVERAGES & TIP \$ _____
PORTERS-BELLMEN \$ <u>10 00</u>	PORTERS-BELLMEN \$ <u>10 00</u>
LIMOS-TAXIS-BUSES \$ _____	LIMOS-TAXIS-BUSES \$ <u>20 00</u>
_____ \$ <u>464 41</u>	_____ \$ _____
(Other)	(Other)
TOTAL THIS DATE \$ _____	TOTAL THIS DATE \$ <u>30 00</u>

IF MORE THAN FIVE DAYS
ATTACH AN ADDITIONAL
VOUCHER SHEET

TOTAL OF ALL DAILY EXPENSES \$ 660 21

(Transfer amount to front side of voucher)

EXPLANATIONS (IF NEEDED):

Reimbursable expenses shall not include expenses of a personal nature or those expenses which are not related to fund business. For example personal recreational expenses such as golf tennis rental of fishing boat and in room movies are not reimbursable expenses

SPACE FOR USE OF ADMINISTRATIVE AGENT OR FOR APPROVAL OF TRUST OFFICERS (IF REQUIRED)

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THE
WASHINGTON
COURT HOTEL

525 New Jersey Avenue N W Washington D C 20001 1527 (202) 628 2100 (800) 321 3010 Fax (202) 879 7918
www.washingtoncourthotel.com

SIKORSKI RON
OPERATING ENGINEERS TRUST

ARRIVAL
DEPARTURE
NO. IN PARTY
RATE

5/15/05
5/19/05
1
205 00

ACCOUNT NO. 539111

ROOM NO. 1618

NO.	DATE	DESCRIPTION	AMOUNT
A STANDARD			
1	5/15/05	THE COURT 19 15 1618 1408	\$75 80
2	5/17/05	THE COURT 15 25 1618 1521	\$17 30
3	5/17/05	THE COURT 18 28 1618 1535	\$136 03
4	5/17/05	THE COURT 21 53 1618 1558	\$240 59
5	5/18/05	CAFE & GRILL 10 24 1618 1610	\$20 45
6	5/19/05	AMERICAN EXPRESS 1003 1618 1618	\$490 17CR
* BALANCE DUE			\$ 00

LNC

BK1

COMPANY

STREET

CITY

STATE

ZIP CODE

Regardless of charge instructions, I acknowledge the above as personal indebtedness

GUEST SIGNATURE

PAID JUN 06 2005



AMT - AMERICAN EXPRESS TRAVEL

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Corporate Office 1104 Wescove Place, Suite A • West Covina, CA 91790 • (626) 917-9341 • FAX (626) 917-9347

SALES PERSON CH
CUSTOMER NRK 626/928900

ITINERARY/INVOICE NO 0044351
IZHOEH

TO OPERATING ENGINEERS PASADENA ELECTRONIC TICKET
MR KURT GLASS
150 E CORSON ST
PASADENA CA 91103

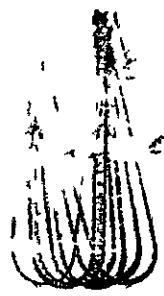
DATE: 28 APR 05
PAGE: 02

FOR SIPORSKI/KON MR

19 JUN 05 SUNDAY

TOTAL SALE	1 085 2
TOTAL TAX	118 0
NET CL BILLING	1 203 3
<hr/>	
TOTAL AMOUNT DUE	0 00

PHOTO IDENTIFICATION IS REQUIRED AT CHECK-IN
THANK YOU FOR CHOOSING AMT/AMERICAN EXPRESS TRAVEL
THE ABOVE ITINERARY HAS BEEN REVIEWED AND IS CONFIRMED
DATE _____ SIGNATURE _____
ALL TRANSACTIONS ARE SUBJECT TO APPLICABLE
PROCESSING CANCELLATIONS AND/OR CHARGE FEE
ATTENTION INTERNATIONAL TRAVELLERS REMEMBER TO ORDER
YOUR FOREIGN CURRENCY AMT/AMERICAN EXPRESS TRAVEL HAS
FOREIGN CURRENCY AVAILABLE TO BUY AND SELL



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www.amttravel.com

www.amtvacations.com

ITINERARY

PAID JUN 06 2005



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SALES PERSON CH
CUSTOMER NUMBER 6267928900

ITINERARY/INVOICE NO 0044351
IZHOEH

TO OPERATING ENGINEERS PASADENA ELECTRONIC TICKET
MR KURT GLASS
150 E CORSON ST
PASADENA CA 91103
CONFIRMATION IZHOEH

DATE 28 APR 01
PAGE 01

FOR SIKORSKI/RON MR

*** PASSENGER BOARDING PASS OR SECURITY DOCUMENT ***
*** IS REQUIRED AT AIRPORT SECURITY SCREENING ***

15 MAY 05 SUNDAY

AIR AMERICAN AIRLINES FLT 1330 FIRST CLASS BREAKFAST
LV ONTARIO 541A EQP BOEING 747
DEPART TERMINAL 4 02HR 50MIN
AR DALLAS FT WORTH 1131A NON-STOP
REF IZHOEH

SIKORSKI/RON MR SEAT 31 AA-34Y119B
AIR AMERICAN AIRLINES FLT 1624 FIRST CLASS LUNCH
LV DALLAS FT WORTH 1230I EQP MD-80
AR BALTIMORE WASHNIN 435P 03HR 00MIN
NON-STOP
REF IZHOEH

SIKORSKI/RON MR SEAT 3A AA 34Y119B
AISLE NOT AVAILABLE WINDOW ASSIGNED

19 MAY 05 THURSDAY

AIR AMERICAN AIRLINES FLT 1452 FIRST CLASS BREAKFAST
LV BALTIMORE WASHNIN 810A EQP BOEING 757
AR DALLAS FT WORTH 1033A 03HR 17MIN
NON-STOP
REF IZHOEH

SIKORSKI/RON MR SEAT 3C AA 34Y119B
AIR AMERICAN AIRLINES FLT 1640 FIRST CLASS LUNCH
LV DALLAS FT WORTH 1226P EQP BOEING 757
AR ONTARIO 127P 03HR 01MIN
ARRIVE TERMINAL 4 NON-STOP
SIKORSKI/RON MR SEAT 3E AA-34Y119B REF IZHOEH

19 JUN 05 SUNDAY

OTHER LOS ANGELES
DOCUMENTATION FEE
TRANS FEES

BILLED TO AMERICAN EXPRESS

35 00

AIR TICKET AA 1105445680
ELECT TICKET

Visit our websites for discounts

SIKORSKI/RON MR
BILLED TO AMERICAN EXPRESS

1 168 6

www.amtcruises.com

www.amttravel.com

www.amtvacations.com

OCEANAIRE
SEAFOOD ROOM
1201 F STREET NW
WASHINGTON DC 20006
202-347-BASS

EMP STEVEN C AMEX
Date 05/18/05 Time 22 11
Table 55
201758

Card Holder SIKORSKI/RJ
Card Number XXXXXXXXX11003 XX/XX
Auth-Code 597174 Ctrl 83449

Amount	275 56
Tip	<u>53 00</u>
Total	<u>330 56</u>

X
Cardmember agrees to pay total in
accordance with agreement governing
use of such card

*** Customer Copy ***

CUSTOMER RECEIPT

This receipt is provided for your convenience for
Tax and personal records

Date 5/18/05

Check # _____

Amount 86⁴⁰

Tip 17⁰⁰

Serve [Signature]

Guest Signature [Signature]



OLD EBBITT GRILL®

OPERATING ENGINEERS TRUST FUNDS

I.U.O.E. LOCAL 12 HEALTH & WELFARE / PENSION / VACATION / TRAINING

100 EAST CORSON STREET PASADENA CALIFORNIA 91103 (626) 356 1000

P.O. BOX 7063 PASADENA CALIFORNIA 91109

WEBSITE www.oefunds.org



February 23, 2006

Mr Ron Sikorski
I U O E , LOCAL #12
1647 W Lugonia
Redlands, CA 92374

Dear Mr Sikorski

A review of our records indicates that no reimbursements were issued to you from the Operating Engineers Funds, Inc , for Calendar Year 2005